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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Application Number	10/072,564
Filing Date	February 6, 2002
First Named Inventor	Li-Wen Chen
Art Unit	2661
Examiner Name	Unknown
Attorney Docket Number	52719.00016

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(in duplicate)☒ Return Postcard☐ Information Disclosure Statement☐ Certified Copy of Priority
Document(s)☐ Response to Missing Parts/
Incomplete Application☐ Response to Missing
Parts under 37 CFR
1.52 or 1.53☐ Drawing(s)☐ Licensing-related Papers☐ Petition☐ Petition to Convert to a
Provisional Application☐ Power of Attorney, Revocation
Change of Correspondence Address☐ Terminal Disclaimer☐ Request for Refund☐ CD, Number of CD(s) _____☐ After Allowance Communication to
Group☐ Appeal Communication to Board of
Appeals and Interferences☐ Appeal Communication to Group
(Appeal Notice, Brief, Reply Brief)☐ Proprietary Information☐ Request for Status of Application☒ Other Enclosure(s)
(please identify below):**Request for Withdrawal as
Attorney or Agent (in triplicate)**

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENTFirm
or
Individual nameAaron Wining, Reg. No. 45,229
Squire, Sanders & Dempsey, L.L.P.
600 Hansen Way
Palo Alto, CA 94304-1043

Signature

Date

October 10, 2003

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name

Aaron Wining

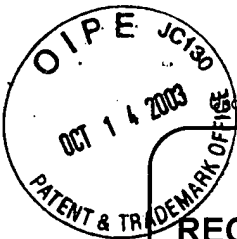
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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT**

Application Number	10/072,564
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I hereby apply to withdraw as attorney or agent for the above identified application.

The reasons for this request are: Client has requested that this patent application be transferred to another law firm.

CORRESPONDENCE ADDRESS

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

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OR

<input checked="" type="checkbox"/> Firm or Individual Name	Charlie Kulas				
Address	Carpenter and Kulas, L.L.P.				
Address	1900 Embarcadero Road, Suite 109				
City	Palo Alto	State	CA	ZIP	94303
Country	USA				
Telephone	650-842-0300	Fax	650-842-0304		

- ☒ This request is made on behalf of myself and
- ☒ all the attorneys/agents of record,
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☐ the attorneys/agents associated with Customer Number

This request is enclosed in triplicate (including any attachments).

Name	Aaron Winger, Reg. No. 45,229 Squire, Sanders & Dempsey, L.L.P. 600 Hansen Way Palo Alto, CA 94304-1043
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Signature

Date October 10, 2003

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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